



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

## \*BIBDATASHEET\*

Bib Data Sheet

CONFIRMATION NO. 7645

|                             |                                       |              |                        |                                 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|
| SERIAL NUMBER<br>10/630,163 | FILING DATE<br>07/30/2003<br><br>RULE | CLASS<br>280 | GROUP ART UNIT<br>3616 | ATTORNEY DOCKET NO.<br>3389.2.4 |
|-----------------------------|---------------------------------------|--------------|------------------------|---------------------------------|

## APPLICANTS

Thomas Reiter, Dachau, GERMANY;

Karl-Heinz Sommer, Stockdorf, GERMANY;

Jorg Albert, Germering, GERMANY;

\*\* CONTINUING DATA \*\*\*\*\*

None

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

Yes

GERMANY 102 35 128.7 08/01/2002

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/24/2003

|   |          |         |        |             |
|---|----------|---------|--------|-------------|
| Foreign Priority claimed<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR | SHEETS  | TOTAL  | INDEPENDENT |
| 35 USC 119 (a-d) conditions met<br><input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance | COUNTRY  | DRAWING | CLAIMS | CLAIMS      |
| Verified and Acknowledged<br>Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>   | GERMANY  | 4       | 20     | 1           |

## ADDRESS

21552  
MADSON & METCALF  
GATEWAY TOWER WEST  
SUITE 900  
15 WEST SOUTH TEMPLE  
SALT LAKE CITY, UT  
84101

## TITLE

Airbag system designed for two persons

|                                   |  |   |
|-----------------------------------|--|---|
| FILING FEE<br><br>RECEIVED<br>750 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT.<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|--|---|